PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE rEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All interts correspondence including the Patent, advance orders and notification of maintenance fees will be mainled to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a separate "Fee ADDRESS" for address, and/or (c) indicating a separate "Fee ADDRESS" for address, and/or (c) indicating a separate "Fee ADDRESS" for address, and/or (d) indicating a separate "Fee ADDRESS" for address, and/or (d) indicating a separate "Fee ADDRESS" for address, and/or (e) indicating a separate "Fee ADDRESS" for address, and/or (e) indicating a separate "Fee ADDRESS" for address, and/or (e) indicating a separate "Fee ADDRESS" for address, and/or (e) indicating a separate "Fee ADDRESS" for address, and/or (e) indicating a separate "Fee ADDRESS" for address and maintenance fee notifications

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

7590 06/18/2008

FILING DATE

David B. Smith Michael Best & Friedrich 100 East Wisconsin Avenue Suite 3300 Milwaukee, WI 53202-4108

APPLICATION NO.

Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Musich (Depositor's name muse (Signature 2008 (Date) FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.

9612

10/571.183 03/09/2006 James Edmond Bateman 063511-0088-00 TITLE OF INVENTION: IONISING PARTICLE ANALYSER FOR THE SEPARATION OF THE FLUORESCENT YIELD AND THE TOTAL

APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1440 \$300 50 \$1740 09/18/2008 EXAMINER ARTIMIT CLASS-SUBCLASS VANORE, DAVID A 2881 250-294000 Change of correspondence address or indication of "Fee Address" (37 CFR 1,363). 2. For printing on the patent front page, list Michael Best & (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, Friedrich LLP (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

ELECTRON YIELD IN EXTENDED X-RAY ABSORPTION FINE STRUCTURE MEASUREMENTS

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Council for the Central Laboratory of the Research Councils

Cheshire, United Kingdom

Please check the appropriate assignce category or categories (will not be printed on the patent) : 🔲 Individual 🔀 Corporation or other private group entity 🔲 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee

Number is required.

Publication Fee (No small entity discount permitted)

Advance Order - # of Copies

A check is enclosed. Payment by credit card. BOMOPECS: NOREXINABLES IN

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-3080 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

□ b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signatur David B. Smith Typed or printed name

This collection of information is required by 37 CFR [31]. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) as application. Confidentiality is generated by 31 SC 92 CFR [1.4 This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time with the form and/or suggestions for rectaining this many conjugate to complete the property of the process of the property of the propert

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number